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PATENT APPLICATION FEE DETERMINATION DECORD

Substitute for Form PTO-875									101 CCC HX		
APPLICATION AS FILED - PART I (Cotumn 1) (Cotumn 2)							SMALL	ENTITY	OR	OTHER	
Г	FOR	NUM	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	]	RATE (S)	FEE (5)
	SIC FEE CFR 1.16(a), (b), or	(0)			W		10112107		1	10172107	
SE/	RCH FEE FR 1.16(k), (i), or (				<b>A</b>	1					
EX	MINATION FEE			(	-00-	1			İ		<u> </u>
101	CFR 1.16(o), (p), or AL CLAIMS	7	minus 7	7-1		1	x =		OR	х =	
IND	CFR 1.16(I)) EPENDENT CLA	IMS )				1			UK		
(37	CFR 1.16(h))	If the spi	If the specification and drawings exceed 100			ł	× =			X =	
APPLICATION SIZE sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each						1			İ		
	: CFR 1.16(s))	additiona	additional 50 sheets or fraction thereof. See						1		
35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(e).						ł	· · · · · · · · · · · · · · · · · · ·		l		<u> </u>
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(II))									1		
* If the difference in column 1 is less than zero, enter "O" in column 2.							TOTAL			TOTAL	
APPLICATION AS AMENDED - PART II											
SUF (Column 1) (Column 2) (Column 3)							SMALL I	ENTITY	OR	OTHER SMALL	
۲	1-4115	CLAIMS	Т	HIGHEST	<del></del>	1			l		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
	Total (37 CFR 1.180))	·	Minus	" 20	=/		×25 =	ree (a)	OR	×50 =	FEE (8)
	Independent (37 CFR 1.18(h))	. 1	Minus	" (B)	" /		×100 =		OR	×500 -	
ME	Application Size Fee (37 CFR 1.16(s))						-100		\ \hat{\chi}	ULA	/
٧	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		7
							TOTAL ADD'L FEE	• /	OR	TOTAL ADD'L FEE	1
		(Column 1)		(Column 2)			-	•			
		CLAIMS REMAINING		HIGHEST NUMBER	(Column 3) PRESENT		RATE (S)	400)		RATE (\$)	4001
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MENT	Total (37 CFR 1.188))		Minus	**	=		x =		OR	х =	, CE (9)
ENDM	Independent (37 CFR 1.16(h))	•	Minus	•••	=		x =		OR	х =	
AME	Application Size Fee (37 CFR 1.16(s))								<b>~</b> `		
⋖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
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		olumn 1 is less tha					·			. 50 6. 00	
•	" If the "Highest I	Number Previously	Paid For	IN THIS SPACE	is less than 20.	ente	er "20".				

"" if the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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